

# PART B - FEE(S) TRANSMITTAL

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 I hereby certify that this Patent Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop (571) 273-2885, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Jacqueline Andreu** (Depositor's name)  
*Jacqueline Andreu* (Signature)  
**January 28, 2011** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY CHECK NO.	CONFIRMATION NO.
10789,817	02/27/2004	John G. Bashir	068911-0074	5656

TITLE OF INVENTION: SYNERGISTIC ANTI-INFLAMMATORY PHARMACEUTICAL COMPOSITIONS AND RELATED METHODS USING CURCUMINOIDS OR METHYLXANTHINES

## Please see Statement of Entity Status Change Notification Under 37 CFR Sec. 1.27(g)(2)

APPL. TYPE	SMALL ENTITY	USPT. FEE DUE	PUBLICATION FEE DUE	PRIV. PAID (ISS. FEE)	TOTAL FEE DUE	DATE DUE
non-supervised	<b>YES: No</b>	<b>NOXXX \$1,510</b>	\$300	\$0	<b>NOXXX \$1,810</b>	04/05/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
CARTER, KENDRA D	1627	424-77800G

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.361)

- ☐ Change of correspondence address for Change of Correspondence Address from PTO/SB/122 attached.
- ☐ "Fee Address" indication for "Fee Address" Indication form PTO/SB/127, Rev 03/02 or more recent attached. Use of a Customer Number is required.

2. For printing on the patent front page, list **McDermott Will & Emery LLP**

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

**Metaproteomics, LLC**

**San Clemente, California**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies

4b. Payment of Fees: (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-1133**. (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above)

- ☐ Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27
- ☐ Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2)

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent or the assignee or other party in interest as shown on the records of the United States Patent and Trademark Office.

Authorized Signature: *Alabak R. Royace*

Date: **January 28, 2011**

Typed or printed name: **Alabak R. Royace**

Registration No.: **59,037**

This collection of information is required by 37 CFR 1.141. The information is required to obtain or retain a benefit for the public which is in the public interest and is in the public interest. The information is required to obtain or retain a benefit for the public which is in the public interest and is in the public interest. The information is required to obtain or retain a benefit for the public which is in the public interest and is in the public interest.

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